

Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at http://about.jstor.org/participate-jstor/individuals/early-journal-content.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

795 April 29, 1904

Plague at Porte Allegre—Suspect plague at Rio Grande do Sul.

Under date of March 19, the United States consular agent at Rio Grande do Sul writes me as follows:

There appears to be a divergence of opinion amongst the medical men of Porte Allegre regarding the disease, some classifying it as bubonic plague, others as malignant typhus, ataxic fever, etc.

Regarding this city, about seven or eight weeks ago a young woman (Italian), apparently in good health, died suddenly under suspicious

circumstances.

About ten days ago a man was taken to the Portuguese hospital suffering apparently from bubonic plague. The disease was verified and classified as such.

It is reported unofficially that sporadic cases have occurred in the suburbs, but I have not heard of any fatal cases.

Disinfection of vessels.

The disinfection of vessels sailing from here to ports of Brazil lying to the south of this port is performed at the quarantine station at Ilha Grande. The plant is a very excellent one, and its working has certainly been attended with very good results as regards the disinfection of vessels leaving here for northern ports, which are shown by the freedom of such disinfected vessels from disease after leaving this port.

Progress of sanitation in the State of São Paulo.

The members of the French yellow-fever commission, who have been here some months, have visited the sewerage works at Rio Claro and express themselves as highly pleased with what they saw and recommend these works as models for other Brazilian towns. The system is said to be particularly good. The way in which the State of São Paulo has faced and almost solved the sanitary problem would be creditable to any country. Only a few years ago not a single town in São Paulo had any sewerage system. Interior towns, like Campinas, were decimated by fever and depopulation was threatened. Now there is not a town of any importance without its own system, and within a few years there will not be a village that is not well supplied with water, drains, and sewers.

We have before us the report of the municipality of São Carlos do

Pinhal, formerly one of the worst fever districts.

In 1901 the cases of infectious disease numbered 1,244, in 1902 1,143, and in 1903, on completion of the sewerage system, fell to 754 for a population of some 50,000.

Mortality report of Rio de Janeiro for week ended March 27.

During the week ended March 27 there were, in all, 289 deaths—a very considerable decrease from the previous week. Of these deaths 1 was caused by yellow fever, with 1 new case reported. At the close of the week there was 1 case of this disease in the hospital of São Sebastião. The death occurred in the case of a person residing in the district of Santa Anna, in the city. Plague caused 2 deaths, with 1 new case. Both deaths occurred in the Paulo Candido Hospital at